



AGENCY FOR HEALTHCARE RESEARCH AND QUALITY



Best Practices for Promoting Mental Health and Emotional Well-Being Among Nursing Home Staff

Nursing home staff routinely face stressful and emotionally draining working conditions. Over time, this can negatively impact their mental health. Nursing home leaders can play a key role in promoting staff mental health. This guide offers leaders ideas for promoting emotional well-being among nursing home staff.

MAKE WELL-BEING PART OF NURSING HOME CULTURE

When leaders build a culture that supports staff well-being, it can help improve staff morale and retention. Below are some examples of actions leaders can take to make well-being part of nursing home culture. It is important to note that these activities are voluntary.

- Start by letting staff know that nursing home leaders will be taking steps to support emotional well-being in the workplace. You can do this during a presentation at a staff meeting or by distributing informational materials on the topic. Make it known that leadership and administration are committed to regular communication through ongoing feedback.
- Post “check-in boards” (modeled after the one below) for staff to share stress levels. Staff members can answer anonymously by placing magnets or post-it notes in the columns corresponding to their stress levels or submit their answers via online polls created by leaders. These boards help nursing home leaders become more aware of general stress levels of staff. When staff report stress levels that fall outside of the Green Zone, nursing home leaders should provide behavioral health supports to those who are struggling (for example: making counselors available or adopting a peer-support or buddy system).

Check-In Board



Safety First Aid (Watson, Westphal & Gist, 2020)

- Hold well-being huddles with staff at the beginning or end of a shift to hear their concerns and focus on what matters to care teams.
- Provide time to mourn losses and create spaces (e.g., a quiet room) where staff can take a break, meditate, or relax.
- Provide education materials and training on the Stages of Grief and provide access to grief counselors and support groups – on and off site.
- Normalize asking for help, crying, and mourning practices, such as through moments of silence, memorial or celebration services, or creating visible memorial tributes.
- Consult the Human Resources office for additional resources, including Employee Assistance Programs (if applicable).
- Reach out to professional care partners (such as hospice partners) to assist in holding support meetings with staff.
- Develop ongoing and regular training programs that will assist staff to understand common disease processes, communication, leadership, conflict resolutions, skill building, etc.
- Celebrate the positives of each day, such as recognizing birthdays, good work, and teamwork.
- Create idea boards in staff areas to allow staff to share and reflect artwork, creative or expressive writing, photos, etc.
- Encourage impromptu meetings in staff room, nursing units, and staff work areas to promote open and ongoing communication and feedback.

COMPASSIONATE COMMUNICATION

Encourage staff to use compassionate communication. Compassionate communication directs people to focus on their observations and feelings, and to ask for what they need to address stress. This type of communication helps people respond to themselves and others with kindness and strengthens work relationships. Compassionate communication has four steps:

1. Observations	2. Feelings	3. Needs	4. Request
Observe what people are saying or doing that they like or don't like.	State how they feel when they observe these words or actions. Are they hurt, fearful, happy, annoyed?	Express needs that are connected to the feelings they have identified.	Follow up these needs with a specific request.

For example, a staff member might communicate the following to a supervisor:



When I see myself and other staff members working around the clock to care for residents with COVID, I feel overwhelmed and burned out. I'd like to request a temporary rotation to a non-COVID unit.

Supervisors can respond with attuned listening, which involves communicating both verbally and non-verbally that they want to hear what the staff member has to say ("I hear what you're saying and I'm sorry you are feeling this way. I will look into whether we can do that for you."). It also requires fully hearing the staff member without an agenda.

Leadership can consider providing training to staff on a variety of topics to support a culture of kindness and compassionate communication including: "Active Listening", Customer Service trainings, and ongoing staff trainings on Alzheimer's and dementia care and caregiver support.

Leaders can model compassionate communication during staff meetings, rounds, and huddles.

FOR MORE INFORMATION

Additional resources, including a series of 5-minute staff well-being learning modules, can be found in the AHRQ COVID-19 Nursing Home Resource Catalog, available at [AHRQ.gov/NHwellbeing](https://www.ahrq.gov/NHwellbeing).



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